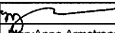


<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3>		<p style="text-align: center;">Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/530,025-Conf. #2944</td> </tr> <tr> <td>Filing Date</td> <td>April 1, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Toshihiro ISE</td> </tr> <tr> <td>Examiner Name</td> <td>C. Aulakh</td> </tr> <tr> <td>Art Unit</td> <td>1625</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0649-1067PUS1</td> </tr> </table>		Application Number	10/530,025-Conf. #2944	Filing Date	April 1, 2005	First Named Inventor	Toshihiro ISE	Examiner Name	C. Aulakh	Art Unit	1625	Attorney Docket No.	0649-1067PUS1
Application Number	10/530,025-Conf. #2944														
Filing Date	April 1, 2005														
First Named Inventor	Toshihiro ISE														
Examiner Name	C. Aulakh														
Art Unit	1625														
Attorney Docket No.	0649-1067PUS1														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT	(\$)	120.00													

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILING FEES			SEARCH FEES		EXAMINATION FEES			
	Small Entity			Small Entity		Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
Utility	310	155	510	255	210	105			
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAIM FEES									
Fee Description								Small Entity	
								Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)								50	25
Each independent claim over 3 (including Reissues)								210	105
Multiple dependent claims								370	185
Total Claims	Extra Claims	Fee (\$)		Fee Paid (\$)		Multiple Dependent Claims			
7	- 20 =	x				Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims	Extra Claims	Fee (\$)		Fee Paid (\$)					
2	- "	x							
HP = highest number of Independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)					
	- 100 =	/50 =	(round up to a whole number) x						
4. OTHER FEE(S)									
Non-English Specification, \$130 fee (no small entity discount)								Fees Paid (\$)	
Other (e.g., late filing surcharge): 1251 Extension for response within first month								120.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,069
Name (Print/Type)	MaryAnne Armstrong, Ph.D.	Telephone	(703) 205-8000
		Date	March 3, 2008